62A384-G (1-07)
Commonwealth of Kentucky
DEPARTMENT OF REVENUE

Signature of Producer/Operator

NATURAL GAS PROPERTY TAX RETURN

File with:

Department of Revenue

Station 33

501 High Street

501 High Street Frankfort, Kentucky 40620 (502) 564-8334

Property Assessed January 1, _____

Name							
Number and Street		Social Security Number					
		1					
City	State	ZIP Code	Telephone Number	Federal Identification No			
owns. This includes sub-surface of reporting developed gas pro knowledge of developed gas pro	mineral rigl perty. Eacl perties in th 15. File a	hts which are ta h year all pers e Commonwea separate return	exable as an interest sons, corporations, lth of Kentucky mu a for each develope	s required to report all taxable property which he or she in real property. This return is provided for the purpose businesses and partnership owning, leasing or having st complete and file this tax return with the Department d property per county. If the division of ownership is ual well.			
DEVELOPED PROPER	TY						
Property located in County, Kentucky.							
Year of First Production		_					
Lease Number Assigned by l	Purchaser_						
Property Name and Well Nu	mber						
Total Gas Production (Januar	ry 1–Decen	nber 31)		(MCFs			
Number of Producing Wells							
Purchaser Name(s)							
Operator's Name							
Total Dollar Value of Well P	roduction (Less Severan	<u>ce Tax</u>) \$				
Division of Ownership (See A	Reverse Sch	hedule)					
•		,					
		_					
		I	DECLARATION				
				anying schedules and statements) has been examined by e return; and that my taxable property has been listed at			
Name of Company			S	signature of Preparer			

Filings received after April 15 will be treated as omitted with applicable penalties applied.

Date

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Natural Gas Property Division of Interest - Ownership Schedule

Lease Name: _____

Commonwealth	of	Kentucky
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DEPARTMENT OF REVENUE

Lease Number: _____

Page:											
Owner Name	Social Security No. or FEIN	Owner Address	City	State	Zip Code	Decimal % (0.875) Ownership of Lease	Ownership Type (W, O, R)				

INSTRUCTIONS: The producer/operator or agent thereof is **required** to report (1) the names, SSN/Fein and addresses of the working, royalty, and overriding interest owners associated with the property as of January 1; (2) the **decimal** percentage of ownership for each owner; (3) the type of ownership designated by the letter "W," "R," or "O"; and, if applicable, (4) the annual net income (including delayed payments) per royalty or fee owner.

Note: If the producer/operator owns all interest (working and royalty) in the property, enter "1.00" under the heading Decimal % Ownership and an "A" under Ownership Type. The assessment will be based on the industry standard of .875 working and .125 royalty. *Tax bills will be prepared according to this ownership schedule. Complete the schedule to reflect the desired billing.*